



MISSISSIPPI STATE BOARD OF PUBLIC ACCOUNTANCY

5 OLD RIVER PLACE, SUITE 104
JACKSON, MS 39202-3449
(601) 354-7320 (601) 354-7290 FAX
www.msbpa.state.ms.us email@msbpa.state.ms.us

Change of Address

The State Board must be notified in writing of name, address, or employment changes.

License Number: _____ Board File Number: _____ SS Number: _____

NAME

Current: _____
Last First Middle Nickname

Previous: _____
Last First Middle Nickname

RESIDENTIAL ADDRESS

Current: _____ Previous: _____

RESIDENTIAL TELEPHONE

Current: _____ Previous: _____

BUSINESS NAME

Current: _____
Previous: _____

BUSINESS ADDRESS

Current: _____ Previous: _____

BUSINESS POSITION

Current: _____ Previous: _____ Public: ☐ Yes ☐ No

DAYTIME TELEPHONE

Current: _____ Previous: _____

E-MAIL ADDRESS

Current: _____
Previous: _____

Signature

Date

Return completed form to the State Board office as soon as possible.
Name change requires copy of legal documentation (i.e. marriage license, divorce decree)